PTO/SB/01 (10-01)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e))

Attorney Docket Number	RP-00300-US2
First Named Inventor	PELLETIER
COMPLETE IF KNOWN	
Application Number	NA /
Filing Date	NA
Art Unit	NA
Examiner Name	NA

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Level Wind Apparatus for use on a Snow Grooming vehicle

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) ____ as United States Application Number or PCT International Application Number ____ and was amended on (MM/DD/YYYY) ____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application		Foreign Filing Date	Priority	Certified Copy Attached? YES	NO
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number or Bar Code Label 00909 OR ☐ Correspondence address below

Name

Address

City | State | ZIP

Country | Telephone | Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Michel | Family Name or Surname PELLETIER

Inventor's Signature [signature] | Date 2003/10/02

Residence: City Canton De Shefford | State Quebec | Country Canada | Citizenship Canadian

Mailing Address 23 Paquette Street

City Canton De Shefford | State Quebec | ZIP J2G 9J6 | Country Canada

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any]) Claude | Family Name or Surname TRAHAN

Inventor's Signature [signature] | Date 2003/10/02.

Residence: City St-Jean-sur-Richelieu | State Quebec | Country Canada | Citizenship Canadian

Mailing Address 1, St-Maurice Street

City St-Jean-sur-Richelieu | State Quebec | ZIP J3B 3Y3 | Country Canada

☐ Additional inventors are being named on _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → [+]

PTO/SB/81 (02-01)
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	NA
Filing Date	NA
First Named Inventor	PELLETIER
Group Art Unit	NA
Examiner Name	NA
Attorney Docket Number	RP-00300-US2

I hereby appoint:

☒ Practitioners at Customer Number 00909 → *Place Customer Number Bar Code Label here*

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ Firm *or* Individual Name					
Address					
Address					
City		State		Zip	
Country					
Telephone		Fax			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	TRAHAN, Claude
Signature	Claude Trahan
Dat	16 sept 03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

☒ *Total of 02 forms are submitted.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	NA
Filing Date	NA
First Named Inventor	PELLETIER
Group Art Unit	NA
Examiner Name	NA
Attorney Docket Number	RP-00300-US2

I hereby appoint:

☒ Practitioners at Customer Number 00909 → *Place Customer Number Bar Code Label here*

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☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

☐ Practitioner(s) at Customer Number. → *Place Customer Number Bar Code Label here*

OR

☐ Firm *or* Individual Name					
Address					
Address					
City		State		Zip	
Country					
Telephone		Fax			

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	PELLETIER, Michel
Signature	
Date	16 sept 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

☒ *Total of 02 forms are submitted.

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